STATEMENT OF

FORM 1	ORGANIZ (See instruc			Office use only
NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
ARKANSAS F	OR LEADERSHIP POLITICAL A	CTION COMMITTEE (ARE	(PAC)	
ADDRESS (number and	street) PO BOX 1672			
(Check if address is changed)				
	ALEXANDRIA		J LYA [22313 -
		CITY▲	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MA	L ADDRESS (Please provide only one	e e-mail address)		
(Check if address X is changed)	dmarley77@gmail	l.com		
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address is changed)				
			 	
2. DATE 0 1	1 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA		C C00413948	-	
4. IS THIS STATEM)	
I certify that I have exam Type or Print Name of	ned this Statement and to the best of my l		ect and complete	
Signature of Treasurer	Electronically Filed by HARRY	D. MARLEY, JR.	Date 0 1	24 Y 2011
NOTE: Submission of fa	se, erroneous, or incomplete information ANY CHANGE IN INFORM	may subject the person signing this	·	
Office Use Only		For further informa Federal Election Cor Toll Free 800-424-90	nmission 530	FEC FORM 1 (Revised 02/2009)